

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
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49						
50						
TOTAL IND.	7					
TOTAL DEP.	155					
TOTAL CLAIMS	155					

130
22
155

	IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
51								
52								
53								
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98								
99								
100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
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41						
42		3				
43		3				
44		3				
45		1				
46		1				
47		3				
48		3				
49		3				
50		3				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		3				
52		3				
53		3				
54		3				
55		3				
56		3				
57		3				
58		3				
59		3				
60		3				
61		1				
62		3				
63		3				
64		3				
65		3				
66		3				
67		3				
68		1				
69		1				
70		1				
71		1				
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86		1				
87		1				
88		1				
89		1				
90		1				
91		1				
92		1				
93		1				
94		1				
95		1				
96		1				
97		1				
98		1				
99		1				
100		1				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						